

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 1ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1							51		
2		1					52		
3		2					53		
4		2					54		
5		2					55		
6		2					56		
7		2					57		
8		0					58		
9		0					59		
10		0					60		
11		0					61		
12							62		
13		1					63		
14		1					64		
15		3					65		
16		0					66		
17		0					67		
18		0					68		
19		0					69		
20		0					70		
21		2					71		
22		2					72		
23		0					73		
24		0					74		
25		0					75		
26		0					76		
27		0					77		
28		0					78		
29		0					79		
30		0					80		
31		0					81		
32		0					82		
33		0					83		
34		0					84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	2						TOTAL IND.		
TOTAL DEP.	41						TOTAL DEP.		
TOTAL CLAIMS	43						TOTAL CLAIMS		